Limited	Liability	Company	(LLC)
Stateme	ent of Me	mbers	

(Government Code Section 84109)

Type or Print in Ink.

Amendment Check box if an Amendment			Date Stamp	CALIFORNIA 409				
9	24	22		For Official Use Only				
Date qualification threshold met (Month, Day, Year)								

					(1)	Month, Day,	, Year)					
	LLC Information											
	LEGAL NAME OF LIMITED LIABILITY COMPANY:	NAME OF RESPONSIBLE C	OF RESPONSIBLE OFFICER OR PRINCIP.			: PRINCIPA	L/RESPONSIBLE C	FFICER PHON	IE#: PRINCIPAL	/RESPON	SIBLE OFFI	CER EMAIL:
	Related California Residential LLC	Wiliam Witte	m Witte			(949) 660-7272			jguard@	jguard@kaufmanlegalgroup.com		
	LLC STREET ADDRESS:	CITY:	STATE:	ZIP COD	E: LLC I	MAILING AD	ILING ADDRESS (IF DIFFERENT):		CITY: S		STATE:	ZIP CODE:
	44 Montgomery Street, Suite 1300) San Francisco	CA	9410	4							
	NAME OF COMMITTEE:			COV	MITTEE	ID:	COMMITTEE PHO	ONE NUMBER:	COMMITTEE	EMAIL ADI	DRESS:	
	See attached.			145	54009		(510) 423-430	00	filings@s	eowen	scompa	ny.com
	COMMITTEE STREET ADDRESS:	CITY:	STATE:	ZIP COE	E: COM	MITTEE MA	ILING ADDRESS	(IF DIFFEREN	T): CITY:	5	STATE:	ZIP CODE:
	312 Clay St., Ste. 300	Oakland	CA	9460	7							
_	Members (If any members are other	er LLCs. further dis	closure is	require	ed in P	art 3.)						
	FULL NAME	I	MEMBERSHIP TYPE			DATE(S) OF (CAPITAL CONTRIBU	JTION CUN	MULATIVE CAP	ITAL	PERCE	
						CAPITAL CO	NTRIBUTION THRESHO	LD) CON	TRIBUTIONS TO	OLLC C	WNERSHII	PINTEREST
	The Related Companies L.P.	1=	■ MEMBERSHIP 10% OR GREATER □ CAPITAL CONTRIBUTIONS \$10,00		R MORE						90	
	The Nicholas Company, LLC	MEMBERSHIF	MEMBERSHIP 10% OR GREATER							10		0
	The Nicholas Company, LLC	☐ CAPITAL CON	ITRIBUTIONS	\$10,000 OI	R MORE						'	·
		☐ MEMBERSHI										
		CAPITAL CON			R MORE							
		☐ MEMBERSHIF			, MODE							
		CAPITAL CON	TRIBUTIONS	\$ \$10,000 OI	N WORE							
	Names of Member LLCs Listed i	n Part 2										
	NAME OF LLC LISTED IN PART 2				FULL NAMES OF MEMBERS							
	The Nicholas Company, LLC		W	William Witte								

4. Verification

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the statement and the statement and

10/14/2022 Executed on	By		
DATE	B1DCBC4A448F4C9	SIGNATURE	

FPPC Form 409 (Nov/2021)

Name of committee:

Committee to Support Mayor Lisa Gillmor 2022 and Good Government, Sponsored by Santa Clara's Affordable Home and Job Creators